

**2024 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL
REPORT**

DOCUMENT# 722520

Entity Name: GARDENS OF BEACON SQUARE NUMBER FOUR,
INCORPORATED

Current Principal Place of Business:

C/O CONDOMINIUM ASSOCIATES
3001 EXECUTIVE DRIVE SUITE 260
CLEARWATER, FL 33762

Current Mailing Address:

C/O CONDOMINIUM ASSOCIATES
3001 EXECUTIVE DRIVE SUITE 260
CLEARWATER, FL 33762 US

FEI Number: 59-1634512

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CONDOMINIUM ASSOCIATES
C/O CONDOMINIUM ASSOCIATES
3001 EXECUTIVE DRIVE SUITE 260
CLEARWATER, FL 33762 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: CONDOMINIUM ASSOCIATES

11/25/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name WONDERS, HANK
Address C/O CONDOMINIUM ASSOCIATES
 3001 EXECUTIVE DRIVE SUITE 260
City-State-Zip: CLEARWATER FL 33762

Title VP
Name KERR, BOB
Address C/O CONDOMINIUM ASSOCIATES
 3001 EXECUTIVE DRIVE SUITE 260
City-State-Zip: CLEARWATER FL 33762

Title SECRETARY
Name BAKER, LISA
Address C/O CONDOMINIUM ASSOCIATES
 3001 EXECUTIVE DRIVE SUITE 260
City-State-Zip: CLEARWATER FL 33762

Title TREASURER
Name LAKE-THOMPSON, ROSEMARIE
Address C/O CONDOMINIUM ASSOCIATES
 3001 EXECUTIVE DRIVE SUITE 260
City-State-Zip: CLEARWATER FL 33762

Title DIRECTOR
Name JAMISON, JACK
Address C/O CONDOMINIUM ASSOCIATES
 3001 EXECUTIVE DRIVE SUITE 260
City-State-Zip: CLEARWATER FL 33762

Title DIRECTOR
Name KERR, NANCY
Address C/O CONDOMINIUM ASSOCIATES
 3001 EXECUTIVE DRIVE SUITE 260
City-State-Zip: CLEARWATER FL 33762

Title DIRECTOR
Name GARRETT, MARLENE
Address C/O CONDOMINIUM ASSOCIATES
 3001 EXECUTIVE DRIVE SUITE 260
City-State-Zip: CLEARWATER FL 33762

Title DIRECTOR
Name WATSON, BILL
Address C/O CONDOMINIUM ASSOCIATES
 3001 EXECUTIVE DRIVE SUITE 260
City-State-Zip: CLEARWATER FL 33762

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: WONDERS , HANK

PRESIDENT

11/25/2024

Officer/Director Detail Continued :

Title	DIRECTOR
Name	VALSECCHI, LOUIE
Address	C/O CONDOMINIUM ASSOCIATES 3001 EXECUTIVE DRIVE SUITE 260
City-State-Zip:	CLEARWATER FL 33762